## NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)

JAN 3 1 2005

HAND DELIVERZED

DEAN HELLER

SECRETARY OF STATE

				APAKE	
NAME JAMES W. MIDD			NCE IN NEVADA _		
MAILING ADDRESS H C LA BEX 114			NCE IN DISTRICT	WHERE REGI	STERED TO
CITY, STATE, ZIP <u>LSELL4 NV 878</u> TELEPHONE 775 752-2574	<b>3.35</b> vo	<sup>lE</sup> ————————————————————————————————————	NRS 281,571(1	Val	
		-	1410 201,07 1(1	(a)	
List all public offices for which this financial disc	closure statement is	required [NRS 2	81.571, Subsection	1 1(g)]:	
			ANNUAL	CANDIDATE	APPOINTMENT
			all elected and appointed public	(no later than the 10th day	to fill unexpired term of an elected or
			officers	after the last day to qualify as a	appointed public officer
			(no later than Jan, 15 each year)	candidate)	(within 30 days)
Public Office	Annual Compensation	Term or Date Appointed	NRS 281.559(1)(b)	NRS 261.561(1)(a)	NRS 281,559(1)(n)
CLAUER VALLEL CA	Compensation	JAN 45	281,561(1)(b)		<del></del> 1
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	\$	<del>_</del>	L		
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RANGHING BOANTOWN HOTEL/CA	3 SURVE	A8/. </th <th>*^~~</th> <th></th> <th>Self Household Member</th>	*^~~		Self Household Member
					<b>好</b> 口
MORTENSEN PARTNERS	LP (FAM.	ly Limitar	TANTAL	(ge	图积
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Link and and the to the		A			
List each creditor to whom you or a member of	your household ow	es \$5,000 or mo	ore [except (1) o	lebt secured	by mortgage
or deed of trust on real property which is not re vehicle for personal use was retained by seller]	quired to de listed b	elow, and (2) de	editor which a s	ecurity intere	est in a motor
to indicate hereofied use was refailed by seller!	UNIO ZO 1.3/1, SUDSECT	on 1(a)]:			Care Household
• · · · · · · · · · · · · · · · · · · ·				;	Self Member
NONE	<u></u>				<b>23 2</b> 7
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firm, business, trust joint venture, syn involved as a trustee, beneficiary of a	dicate, corporation or associ- trust, director, officer, owner i	or economic gain, including a proprietor ation) with which you or a member of y in whole or in part, limited or general pa standing stock or securities issued by the	your hous	ehold is
MORTENSEN PARTA	NERS LP db	A Z BAR RANCH	Self	Household Member
			_ 📙	
your household has a legal or benefici- state or an adjacent state [NRS 281.571, Specific I or	al interest; (2) the fair market Subsection 1(c)):	n personal residence): (1) in which you value of which is \$2,500 or more; and	ı or a me (3) locate	mber of d in this
Z BAR RANCH CLA	-avally	RANGHING		
during the preceding taxable year [exc consanguinity or affinity; and (2) cerem	cept (1) a gift received from a nonial gifts received for a birt substantial interest in your leg	of an aggregate value of \$200 from a a person who is related to you within th hday, wedding, anniversary, holiday or jislative, administrative, or political actio	e third de other cen n]	emonial
NONE	Donor	\$\$\$\$\$\$\$	Value of	Gift
		\$ \$ \$		
THE INFORMATION I HAVE PROVIDI			0	
Date: JAN 21, 2205	5 Signature: 10	wa W. Muddo	34	
Rovised 8/28/2003				

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